

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		12/06/94
PIPE CLASSIFIER	MTN	5A	12-11-99
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		59158	1-10-00

### INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral) ..... Canceled                      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Date
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Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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